

## MAIL STOP PATENT APPLICATION

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

### CERTIFICATE OF MAILING BY "EXPRESS MAIL"

**Attorney Docket No.** : FFASC.063A

**Applicant(s)** : Alan M. Kleinfeld and Pavel V. Vodkin

**For** : METHOD AND APPARATUS FOR RATIO  
FLUOROMETRY

**Attorney** : Raymond B. Hom

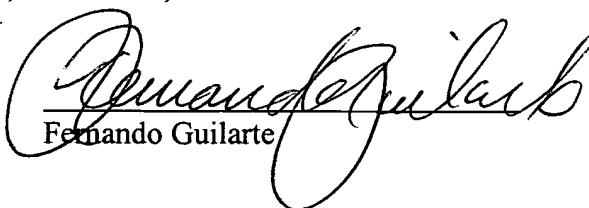
**"Express Mail"**  
**Mailing Label No.** : EV 323830358 US

**Date of Deposit** : September 25, 2003

I hereby certify that the accompanying

Transmittal letter; Specification in 36 pages; 6 sheets of drawings; **Signed**  
Declaration by Inventor in 2 pages; Recordation Form Cover Sheet and  
Assignment in 3 pages; Power of Attorney by Assignee in 2 pages, with copy of  
Assignment; Check in the amount of \$2,454.00 for Filing Fee; Check in the  
amount of \$40.00 for Filing Fee of Recorded Assignment; Return Prepaid  
Postcard

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and are addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

  
Fernando Guilarte

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Commissioner f . r Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

ATTENTION: MAIL STOP PATENT APPLICATION

Sir:

Transmitted herewith for filing is the patent application of

Inventor(s): Alan M. Kleinfeld and Pavel V. Vodkin

For: METHOD AND APPARATUS FOR RATIO FLUOROMETRY

Enclosed are:

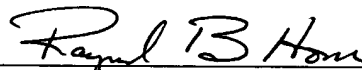
- (X) Specification in 36 pages.
- (X) 6 sheets of drawings.
- (X) Recordation form cover sheet with 2-page assignment.
- (X) Signed declaration by inventor(s).
- (X) Signed Power of Attorney by Assignee, with copy of Assignment.
- (X) Return prepaid postcard.

#### CLAIMS AS FILED

FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE
Basic Fee			\$750	\$ 750.00
Total Claims	82 - 20 =	62 ×	\$18	\$1,116.00
Independent Claims	10 - 3 =	7 ×	\$84	\$ 588.00
If application contains any multiple dependent claims(s), then add			\$280	\$0
<b>TOTAL FILING FEE</b>		<b>\$2,454.00</b>		

- (X) A check in the amount of \$2,454.00 to cover the filing fee is enclosed.
- (X) A check in the amount of \$40.00 to cover the assignment recording fee.
- (X) The Commissioner is hereby authorized to charge any additional fees, which may be required, now or in the future, or credit any overpayment to Account No. 11-1410.

(X) Please use Customer No. 20,995 for the correspondence address.



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Registration No. 44,773  
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Customer No. 20,995  
(619) 235-8550

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